

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>60245</i>	<i>2/9/00</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>45</i>	<i>3/16</i>
FORMALITY REVIEW	<i>BH</i>	<i>60245</i>	<i>11-25-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	<i>02-06-02</i>
Original	<i>02-23-02</i>
Original	<i>02-03-04</i>
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	<i>02-22-04</i>
51	✓
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Claim	Date
Final	
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If more than 150 claims or 10 actions  
staple additional sheet here

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